Case 16-29362 Doc 1 Filed 09/14/16 Entered 09/14/16 18:17:11 Desc Main Document Page 1 of 69

| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptey Court for the | |
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | <u> </u> |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 |
| | Chapter 12 ✓ Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | art 1: Identify Yourself | | | | | | |
|---|----------------------------|---|--|--|--|--|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | | | |
| Your full name Write the name that is on | David First name | First name | | | | | |
| your government-issued picture identification (for example, your driver's | Middle name Foster | Middle name | | | | | |
| license or passport | Last name | Last name | | | | | |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) | | | | | |
| 2. All other names you | | | | | | | |
| have used in the | First name | First name | | | | | |
| last 8 years | NA: LU | | | | | | |
| Include your married or | Middle name | Middle name | | | | | |
| maiden names. | Last name | Last name | | | | | |
| | First name | First name | | | | | |
| | Middle name | Middle name | | | | | |
| | Last name | Last name | | | | | |
| 3. Only the last 4 | XXX - XX- 2207 | xxx - xx- | | | | | |
| digits of your Social Security | OR | OR | | | | | |
| number or federal Individual Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- | | | | | |
| | | | | | | | |

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| De | ebtor 1 David | Foster | Case number (if known) | | |
|--------------|---|---|--|--|--|
| | First Name | Middle Name Last Name | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
| 4. | Any business names and Employer | ✓ I have not used any business names or EINs. | I have not used any business names or EINs. | | |
| | Identification Numbers (EIN) you have used in the | Business name | Business name | | |
| last 8 years | | Business name | Business name | | |
| | Include trade names and doing business as names | EIN | EIN | | |
| | | EIN | EIN | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | |
| | | 8148 S Artesian Number Street | Number Street | | |
| | | Chicago Illinois 60652 | | | |
| | | City State Zip Code | City State Zip Code | | |
| | | Cook County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number Street | Number Street | | |
| | | City State Zip Code | City Chate 7in Code | | |
| _ | | City State Zip Code | City State Zip Code | | |
| 6. | Why you are choosing this | Check one: | Check one: | | |
| | district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

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| Debtor 1 David | | | Case number (if know | vn) |
|---|--|--|--|--|
| First Name | Middle Name | Last Name | | |
| Part 2: Tell the Court Ab | out Your Bankruptcy Cas | е | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | | on of each, see <i>Notice Required I</i> ige 1 and check the appropriate bo | | (b) for Individuals Filing for Bankruptcy (Form |
| 8. How you will pay the fee | court for more details may pay with cash, ca on your behalf, your at I need to pay the fee Individuals to Pay Your I request that my fee By law, a judge may, be less than 150% of the the fee in installments | about how you may pay. To shier's check, or money of torney may pay with a credin in installments. If you che friling Fee in Installments (be waived (You may required to, waive official poverty line that approximately such as the control of the c | ypically, if you rder If your a dit card or checoose this option Official Form 10 est this option of your fee, and oplies to your fan, you must fill of the results. | only if you are filing for Chapter 7. may do so only if your income is amily size and you are unable to pay but the <i>Application to Have the</i> |
| 9. Have you filed for bankruptcy within the last 8 years? | ✓ No. Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | When When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. Go to line 1 Yes. Fill out <i>Initia</i> | ained an eviction judgment against 2. al Statement About an Eviction Jud otcy petition. | | |

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| Debtor 1 David | | | | Foster | Case number (if known) | | | |
|--|---------------|---------------------|--|--|-------------------------------|--|----------|--|
| First Name | _ | | | Last Name | | | | |
| Part 3: Report About An | y Bus | sinesse | es You Own as a S | Sole Proprietor | | | | |
| 12. Are you a sole proprietor of any full- or part-time business? | | No. Yes. | Go to Part 4. Name and location of b Name of business, if ar | | | | _ | |
| A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Number | Street | Yoto | 7in Code | _ _ | |
| If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | C | | Check the appropriate Health Care Bu Single Asset Re Stockbroker (as Commodity Brol | Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above | | | | |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | dead opera | <i>llines.</i> If y | rou indicate that you are a ash-flow statement, and | a small business debt | or, you must attach your most | s debtor so that it can set approprecent balance sheet, statements to not exist, follow the proc | nt of | |
| For a definition of small business debtor, see 11 U.S.C. § 101(51D). | | No. No. Yes. | Bankruptcy Code. | er 11, but I am NOT a | a small business debtor accor | rding to the definition in the other than the definition in the Bankrupto | cy Code. | |
| Part 4: Report if You Ow | n or | Have A | Any Hazardous Pro | perty or Any P | roperty That Needs Im | mediate Attention | | |
| 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and | ✓ | | What is the hazard? If immediate attention is r | | Jane Charles | | | |
| identifiable hazard to public health or | | 1 | ii iiiiinediate attention is i | | geu : | | | |
| safety? Or do you own any property that needs immediate attention? | | , | Where is the property? | Number | Street | | | |
| For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | City | State | Zip Code | | |

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Debtor 1 David Foster Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of about credit counseling, you must file a motion for waiver of

credit counseling with the court.

credit counseling with the court.

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| 16. What kind of debts do you have? 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily for a personal, family, or household purpose." 101(8) as "individual primarily business debts are debts that you incurred to obtain merson individual primarily business debts are debts that you incurred to business or investment or through the operation of the | Debtor 1 David | Fosto | | nown) | | | |
|---|---|--|---|---|--|--|--|
| 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. | First Name Part 6: Answer These Ou | | | | | | |
| Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? 18. How many creditors do you estimate that you owe? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your 20. How much do you estimate do you estimate your 20. How much do you estimate your 20. How much do you estimate your 20. So on the 16. 10. Yes. I am filling under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? 10. Jesus 11. Jesus 12. Jesus | 16. What kind of debts | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. | | | | | |
| do you estimate that you owe? □ 50-99 □ 5,001-10,000 □ 50,001-100,000 19. How much do you estimate your assets to be worth? □ \$0.\$50,000 □ \$1,000,001-\$10 million □ \$500,000,001-\$1 billion 19. How much do you estimate your assets to be worth? □ \$1,000,001-\$10 million □ \$10,000,000,001-\$50 million □ \$10,000,000,001-\$50 million □ \$500,001-\$1 million □ \$500,001-\$10 million □ \$10,000,000,001-\$50 million □ \$10,000,000,001-\$10 million □ \$500,001-\$1 million □ \$100,000,001-\$10 million □ \$500,000,001-\$1 billion □ \$1,000,001-\$10 million □ \$500,000,001-\$1 billion □ \$1,000,001-\$50 million □ \$500,000,001-\$1 billion □ \$1,000,000-\$50 million □ \$1,000,000,001-\$10 million □ \$1,000,000,001-\$10 million | Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to | ty is excluded and administrative expenses are | | | | | |
| estimate your assets to be worth? \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion \$10,000,001-\$10 million \$10,000,000,001-\$10 billion \$10,000,001-\$10 million \$10,000,000,001-\$10 million \$10,000,000,000,001-\$10 million \$10,000,000,000,001-\$10 million \$10,000,000,000,000,000,000,000,000,000, | do you estimate that | that 50-99 | | | | | |
| estimate your \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion | estimate your assets | \$50,001-\$100,000 \$100,001-\$500,000 | \$10,000,001-\$50 million \$50,000,001-\$100 million | \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion | | | |
| \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion | | \$50,001-\$100,000 \$100,001-\$500,000 | \$10,000,001-\$50 million \$50,000,001-\$100 million | \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion | | | |
| Part 7: Sign Below | Part 7: Sign Below | | | | | | |
| I have examined this petition, and I declare under penalty of perjury that the information provided is to and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to hel me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition I understand making a false statement, concealing property, or obtaining money or property by fraud connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** /s/ David Foster Signature of Debtor 1 Executed on Executed on | For you | | | | | | |

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| Debtor 1 | David | | Foster | Case number | (if known) |
|--|-------------------|--|--|--|--|
| | First Name | Middle Name | Last Name | | |
| you are by one If you a represe | | eligibility to proceed un the relief available und to the debtor(s) the not | der Chapter 7, 11, 12, er each chapter for whice required by 11 U.S | or 13 of title 11, Unich the person is .C. § 342(b) and, i | that I have informed the debtor(s) about United States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, nation in the schedules filed with the |
| | o file this page. | /s/ Angie Harb Signature of Attorney f | or Debtor | Date | 9/14/2016 MM / DD / YYYY |
| | | Angie Harb Printed name Semrad Law Firm Firm name 20 S. Clark Street Street 28th Floor | | | |
| | | Chicago City | | Illinois State | 60603 Zip Code |
| | | Contact phone | | Email address | aharb@semradlaw.com |
| | | | | Illin | nois |
| | | Bar number | | Sta | te |

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| Fill in this information to identify your case: | | | | | | |
|---|--------------------------|-------------|----------------------|--|--|--|
| Debtor 1 | David | | Foster | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing | First Name | Middle Name | Last Name | | | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois | | | |
| Case number (If known) | | | (State) | | | |

| Check if this is ar |
|---------------------|
| amended filing |

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$2,052.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$2,052.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$2,000.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$20,920.00 |
| Your total liabilities | \$22,920.00 |
| Part3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,329.21 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J | \$2,129.00 |
| | |

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| De | btor 1 | | | Foster | Case n | umber (if known) | | | | | |
|--|--|---|----------------------------|---------------------------------|------------------|---------------------------|------------|--|--|--|--|
| | | First Name | Middle Name | Last Name | | | | | | | |
| Par | t 4: | Answer These Questio | ns for Administrati | ve and Statistical Re | cords | | | | | | |
| 6. / | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | | | |
| | ✓ Y | es. | | | | | | | | | |
| 7. \ | 7. What kind of debt do you have? | | | | | | | | | | |
| | | Your debts are primarily cons amily, or household purpose. 11 | | • | | , , | | | | | |
| | | Your debts are not primarily on is form to the court with your o | | ave nothing to report on this p | oart of the form | . Check this box and subm | nit | | | | |
| From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | | | | | | | \$2,523.20 | | | | |
| 9. | Cop | by the following special cate | gories of claims from F | Part 4, line 6 of Schedule E | :/F: | | | | | | |
| | Fro | m Part 4 on Schedule E/F, c | opy the following: | | | Total claim | | | | | |
| | 9a. l | Domestic support obligations (| Copy line 6a.) | | | \$0.00 | | | | | |
| | 9b. | Taxes and certain other debts y | ou owe the government. | (Copy line 6b.) | | \$0.00 | | | | | |
| | 9c. (| Claims for death or personal in | cated. (Copy line 6c.) | | \$0.00 | | | | | | |
| | 9d. Student loans. (Copy line 6f.) | | | | \$0.00 | | | | | | |
| | | Obligations arising out of a seprity claims. (Copy line 6g.) | paration agreement or div | orce that you did not report a | as | \$0.00 | | | | | |
| | 9f. E | Debts to pension or profit-shari | ng plans, and other simila | ar debts. (Copy line 6h.) | | \$0.00 | | | | | |
| | 9g. ' | Total. Add lines 9a through 9f. | | | | \$0.00 | | | | | |

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| Fill in this | information to identify your ca | ase: | | | | |
|-----------------------------|--|--|-------------------------------------|---|---|--|
| Debtor 1 | David | | | Foster | | |
| | First Name | Middle I | Name | Last Name | | |
| ebtor 2 pouse, | if filing) First Name | Middle I | Name | Last Name | | |
| | | | | | | |
| tea St | ates Bankruptcy Court for the | Northern | | District of Illinois (State) | | |
| e nun nown) | nber | | | | | |
| · · | 1.5 4.00 4 /5 | | | | | Check if this is an |
| ICI | al Form 106A/B | | | | | amended filing |
| he | dule A/B: Prop | erty | | | | 12 <i>l</i> * |
| ponsib te your art 1: | ble for supplying correct in name and case number (if Describe Each Reside | formation. If more s known). Answer ev ence, Building, | space is r very quest Land, o | e as possible. If two married people a needed, attach a separate sheet to thi tion. or Other Real Estate You Own of dence, building, land, or similar prope | s form. On the top of any a or Have an Interest In | dditional pages, |
| ✓ | No. Go to Part 2 | - | | g,, c. c p. opc | | |
| | Yes. Where is the property? | | | | | |
| 4 | | | | the property? Check all that apply. | | laims or exemptions. Put ed claims on <i>Schedule D:</i> |
| 1.1 | Street address, if available, | or other description | ` | le-family home lex or multi-unit building | | aims Secured by Property. |
| | | | Condominium or cooperative | | Current value of the | Current value of the |
| | | | Man | ufactured or mobile home | entire property? | portion you own? |
| | Number Street | | Land | | Describe the nature of | vour ownership |
| | | | | stment property eshare | interest (such as fee s the entireties, or a life | mple, tenancy by |
| | City State | Zip Code | Othe | | the entireties, or a me | estate), ii kilowii. |
| | | | Who ha | s an interest in the property? Check | Check if this is co (see instructions) | mmunity property |
| | | | one. | | | |
| | | | _ | tor 1 only | | |
| | | | | tor 2 only tor 1 and Debtor 2 only | | |
| | | | | ast one of the debtors and another | | |
| | | | Other in | nformation you wish to add about this y identification number: | s item, such as local | |
| you | own or have more than one, li | st here: | ргорогс | y lacinimodian nambol <u>i</u> | | |
| | | | What is | the property? Check all that apply. | | laims or exemptions. Put |
| 2 | Street address, if available, | or other description | | lle-family home | | ed claims on Schedule D: aims Secured by Property. |
| | , , | | | lex or multi-unit building | Current value of the | Current value of the |
| | | | | dominium or cooperative ufactured or mobile home | entire property? | portion you own? |
| | | | Land | | - | |
| | Number Street | | | stment property | Describe the nature of | your ownership |
| | City City | 7:- 0 - 1 - | Time | eshare er | interest (such as fee s the entireties, or a life | estate), if known. |
| | City State | Zip Code | ∐ Who ha | us an interest in the property? Check | Check if this is co (see instructions) | |
| | | | one. | tor 1 only | | |

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Debtor 2 only

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| Debtor 1 | David First Name | Middle Name | Foster Last Name | Case number | r (if known) | |
|-------------------------|--|--|--|-------------|---|--|
| 1.3 | eet address, if available, or o | | What is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | apply. | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? | • |
| Nu Cit | mber Street y State | Zip Code | Land Investment property Timeshare Other | _ | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | |]] [] | Who has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anote Other information you wish to add a | ner | Check if this is con (see instructions) | mmunity property |
| | | rtion you own for a | e | | | |
| you own t 3. Cars, v | | equitable interest i ou lease a vehicle, als | n any vehicles, whether they are rego report it on Schedule G: Executory Cocles | | | |
| 3.1 | Make Model: Year: | Mercedes Benz 2000 | Who has an interest in the propone. Debtor 1 only | erty? Check | the amount of any secure | laims or exemptions. Put ed claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: 2000 Mercedes Benz | 170000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community p | | Current value of the entire property? \$1450.00 | Current value of the portion you own? \$1450.00 |
| 3.2 | Make Model: Year: Approximate mileage: | | instructions) Who has an interest in the propone. Debtor 1 only | erty? Check | the amount of any secure | laims or exemptions. Put ed claims on <i>Schedule D:</i> aims Secured by Property. |
| | Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prinstructions) | | Current value of the entire property? | Current value of the portion you own? |

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| tor 1 | | | | oer (if known) | |
|-------|--|------------------------|---|---|--|
| | First Name | Middle Name | Last Name | | |
| 3.3 | Make Model: | | Who has an interest in the property? Check one. | Do not deduct secured of the amount of any secure | ed claims on <i>Schedule L</i> |
| | Year: Approximate mileage: | | Debtor 1 only | Creditors Who Have Cla | анна зеситей ву Рторег |
| | Other information: | —— L | Debtor 2 only Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | | | At least one of the debtors and another | | |
| | | | Check if this is community property (see | | |
| | | | instructions) | | |
| 3.4 | Make | _ | Who has an interest in the property? Check | Do not deduct secured of the amount of any secure | |
| | Model: Year: | i | one. Debtor 1 only | Creditors Who Have Cla | |
| | Approximate mileage: | — ; | Debtor 2 only | | , , |
| | | — ¦ | T ' | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | | At least one of the debtors and another | | |
| | | | Check if this is community property (see instructions) | | |
| | | | ecreational vehicles, other vehicles, and acc hing vessels, snowmobiles, motorcycle accesso | | |
| Exa | mples: Boats, trailers, motors, pe No | rsonal watercraft, fis | | Do not deduct secured c | |
| Exa | mples: Boats, trailers, motors, pe No Yes Make | rsonal watercraft, fis | hing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check | ories | ed claims on Schedule I |
| Exa | mples: Boats, trailers, motors, per No Yes Make Model: | rsonal watercraft, fis | hing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on <i>Schedule i</i> aims Secured by Prope |
| Exa | mples: Boats, trailers, motors, per No Yes Make Model: Year: | rsonal watercraft, fis | hing vessels, snowmobiles, motorcycle accesso Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured control of any secured | ed claims on <i>Schedule</i> a aims Secured by Prope |
| Exa | mples: Boats, trailers, motors, per No Yes Make Model: Year: Approximate mileage: | rsonal watercraft, fis | who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule a aims Secured by Prope Current value of th |
| Exa | mples: Boats, trailers, motors, per No Yes Make Model: Year: Approximate mileage: | rsonal watercraft, fis | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? | ed claims on Schedule aims Secured by Prope Current value of th |
| 4.1 | mples: Boats, trailers, motors, per No Yes Make Model: Year: Approximate mileage: | rsonal watercraft, fis | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured of the amount of any secure Creditors Who Have Clean Current value of the entire property? | ed claims on Schedule aims Secured by Prope Current value of th portion you own? |
| 4.1 | mples: Boats, trailers, motors, per No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | rsonal watercraft, fis | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure | ed claims on Schedule aims Secured by Proper Current value of the portion you own? claims or exemptions. Ped claims on Schedule |
| 4.1 | mples: Boats, trailers, motors, per No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | rsonal watercraft, fis | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check | Do not deduct secured of the amount of any secure Creditors Who Have Cke Current value of the entire property? Do not deduct secured of | ed claims on Schedule aims Secured by Properaims Secured by Properaims Current value of the portion you own? Claims or exemptions. Pred claims on Schedule in Sch |
| 4.1 | mples: Boats, trailers, motors, per No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | rsonal watercraft, fis | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure | ed claims on Schedule aims Secured by Proper Current value of the portion you own? claims or exemptions. Proper claims on Schedule aims Secured by Proper claims Secured b |
| 4.1 | mples: Boats, trailers, motors, per No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | rsonal watercraft, fis | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured of the amount of any secure Creditors Who Have Classification of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classifications. | ed claims on Schedule laims Secured by Prope Current value of th portion you own? claims or exemptions. Pred claims on Schedule la |
| 4.1 | mples: Boats, trailers, motors, per No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | rsonal watercraft, fis | Mho has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Classes Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classes Current value of the | ed claims on Schedule aims Secured by Proper Current value of the portion you own? claims or exemptions. Proper claims on Schedule aims Secured by Proper Current value of the |
| 4.1 | mples: Boats, trailers, motors, per No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | rsonal watercraft, fis | Mho has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Mho has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Classes Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classes Current value of the entire property? | ed claims on Schedule aims Secured by Proper Current value of the portion you own? claims or exemptions. Proper claims on Schedule aims Secured by Proper Current value of the |
| 4.1 | mples: Boats, trailers, motors, per No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Other information: | rsonal watercraft, fis | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Classes for pages | ed claims on Schedule aims Secured by Prope Current value of th portion you own? claims or exemptions. P ed claims on Schedule aims Secured by Prope Current value of th |

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| De | ebtor 1 | | Foster | Case number (if known) | |
|----------|----------|---------------------------------|---|---------------------------------------|--|
| | | First Name | Middle Name Last Name | | |
| Pa | irt 3: | Describe | our Personal and Household Items | | |
| D | o you | ı own or h | ave any legal or equitable interest in any of | the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | | s and furnishings | | |
| | Examp | oles: Major app | liances, furniture, linens, china, kitchenware | | |
| | No | | | | |
| ✓ | Yes. D | Describe | used furniture | | \$400.00 |
| | Examp | ronics les: Television | s and radios; audio, video, stereo, and digital equipment; co | mputers, printers, scanners; music | |
| H | No | | | | |
| ✓ | Yes. L | Describe | phone | | \$50.00 |
| | Examp | | lue and figurines; paintings, prints, or other artwork; books, picto in, or baseball card collections; other collections, memorab | | |
| | Yes. D | Describe | | | |
| | | les: Sports, pl | orts and hobbies notographic, exercise, and other hobby equipment; bicycles, ks; carpentry tools; musical instruments | pool tables, golf clubs, skis; canoes | |
| ✓ | No | | | | |
| | Yes. D | Describe | | | <u> </u> |
| | No | | les, shotguns, ammunition, and related equipment | | |
| | | | clothes, furs, leather coats, designer wear, shoes, accessori | es | |
| 빒 | No | | | | |
| ⊻ | Yes. L | Describe | used clothing | | \$150.00 |
| | | • | ewelry, costume jewelry, engagement rings, wedding rings, er | heirloom jewelry, watches, gems, | |
| Ħ | | Describe | | | |
| | Examp | n-farm anima bles: Dogs, cat | s, birds, horses | | |
| Ħ | | Describe | | | |
| _ | | | | | |
| 1 | 4. Any | other persor | nal and household items you did not already list, includ | ling any health aids you did not list | |
| ✓ | No | | | | |
| | Yes. D | Describe | | | |
| | . | 1460 -1-11 | luc of all of your outside from Dont O. In the Property | uiaa fau waxaa yaan bana awaa ba I | |
| | | | nlue of all of your entries from Part 3, including any ent number here | | \$600.00 |

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| Debte | or 1 David | | Foster | Case number (if known) | |
|--------------|---|--|-----------------------------|--|--|
| | First Name | Middle Name | Last Name | | |
| Part 4 | Describe Your | r Financial Assets | | | |
| Do <u>y</u> | you own or have | any legal or equitable int | erest in any of the f | ollowing? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. C | ash | | | | |
| E | xamples: Money you ha | ave in your wallet, in your home, in a | safe deposit box, and on ha | nd when you file your petition | |
| | Yes | | | Cash: | |
| | | savings, or other financial accounts nstitutions. If you have multiple acco | | ares in credit unions, brokerage houses, on, list each. | |
| | ☑ No ☑ Yes | | Institution name: | | |
| | | 17.1. Checking account: | us bank | | \$1.00 |
| | | 17.2. Checking account: | | | |
| | | 17.3. Savings account: | us bank | | \$1.00 |
| | | 17.4. Savings account: | | | |
| | | 17.5. Certificates of deposit: | | | |
| | | 17.6. Other financial account: | | | <u> </u> |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | | | |
| | | s, or publicly traded stocks , investment accounts with brokerage | e firms, money market acco | ounts | |
| | Yes | Institution or issuer name: | | | |
| | | | | | |
| | | | | | |
| | an LLC, partnership | | ted and unincorporated | businesses, including an interest in | |
| | ✓ No Yes. Give specific information about them | Name of entity | | % of ownership: | |
| | | | | | |

Official Form 106A/B Schedule A/B: Property page 5

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| Deb | tor 1 | David | | Foster | Case number (if known) | |
|-----|------------|--|--|---------------------------------------|---------------------------------|---|
| | | First Name | Middle Name | Last Name | | |
| 20. | Neg Nor | otiable instruments ir | orate bonds and other negotial nclude personal checks, cashiers' onts are those you cannot transfer t | checks, promissory notes, and mo | oney orders. | |
| | | Yes. Give specific information about them | Issuer name: | | | |
| | | | | | | |
| 21. | | irement or pension mples: Interests in IR | accounts RA, ERISA, Keogh, 401(k), 403(b), | thrift savings accounts, or other p | pension or profit-sharing plans | |
| | ✓ | No | | | | |
| | | Yes. List each account | Type of account: | Institution name: | | |
| | | separately. | 401(k) or similar plan: | | | |
| | | | Pension plan: | | | |
| | | | IRA: | | | |
| | | | Retirement account: | | | |
| | | | Keogh: Additional account: | | | |
| | | | Additional account: | | | - |
| 22. | You Exa | | orepayments deposits you have made so that you with landlords, prepaid rent, public | | | |
| | | Yes | Electric: | | | |
| | | | Gas: | | | |
| | | | Heating oil: | | | |
| | | | Security deposit on rental unit: | | | |
| | | | Prepaid rent: | | | |
| | | | Telephone: | | | |
| | | | Water: | | | |
| | | | Rented furniture: | | | |
| | | | Other: | | | |
| 23. | Anr | nuities (A contract for No | r a periodic payment of money to y | ou, either for life or for a number o | f years) | |
| | | Yes | Issuer name and description: | | | |
| | | | | | | |
| | | | | | | |

Official Form 106A/B Schedule A/B: Property page 6

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| Debt | otor 1 David First Name Middle Name | Foster Case number (if known) Last Name | |
|------|--|--|--|
| 24. | Interests in an education IRA, in an account in a qualified 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | | rogram. |
| | No Institution name and description. Separately file the Yes | ne records of any interests.11 U.S.C. § 521(c): | |
| | | | |
| 25. | Trusts, equitable or future interests in property (other than exercisable for your benefit | n anything listed in line 1), and rights or powers | |
| | ✓ No Yes. Describe | | |
| 26. | Patents, copyrights, trademarks, trade secrets, and other i Examples: Internet domain names, websites, proceeds from roya | | |
| | ✓ No Yes. Describe | and notioning agreements | |
| 27. | Licenses, franchises, and other general intangibles | | |
| | Examples: Building permits, exclusive licenses, cooperative ass No | sociation holdings, liquor licenses, professional licenses | : |
| | Yes. Describe | | |
| Moi | ney or property owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you | | |
| | ✓ No | | |
| | Yes. Give specific information about them, including whether | Federal: | \$0.00 |
| | you already filed the returns | State: | \$0.00 |
| | and the tax years | Local: | \$0.00 |
| 29. | Family support Examples: Past due or lump sum alimony, spousal support, child s | support, maintenance, divorce settlement, property settle | ment |
| | ✓ No | Alimony: | \$0.00 |
| | Yes. Give specific information | Maintenance | : \$0.00 |
| | | Support: | \$0.00 |
| | | Divorce settle | - |
| | | | · · · · · · · · · · · · · · · · · · · |
| 30. | Other amounts someone owes you | Property settle | ement: <u>\$0.00</u> |
| 50. | Examples: Unpaid wages, disability insurance payments, disability Social Security benefits; unpaid loans you made to sor | | , |
| | ✓ No | | |
| | Yes. Describe | | |

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| Deb | tor 1 David | Foster | Case number (if known) | |
|------|---|---|---|--|
| | First Name Middle Name | e Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; he | ealth savings account (HSA); credit, ho | meowner's, or renter's insurance | |
| | Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from If you are the beneficiary of a living trust, expect property because someone has died. | | or are currently entitled to receive | |
| | Yes. Describe | | | |
| 33. | Claims against third parties, whether or not Examples: Accidents, employment disputes, ins | | demand for payment | |
| | ✓ No Yes. Describe | | | |
| 34. | Other contingent and unliquidated claims of to set off claims | of every nature, including counterc | laims of the debtor and rights | |
| | ✓ No Yes. Describe | | | |
| 35. | Any financial assets you did not already list | | | |
| | ✓ No Yes. Describe | | | |
| 36. | Add the dollar value of all of your entries fro | | | \$2.00 |
| Part | 5: Describe Any Business-Related | Property You Own or Have a | n Interest In. List any real estate i | in Part 1. |
| 37. | Do you own or have any legal or equitable in | nterest in any business-related prop | ertv? | |
| | No. Go to Part 6. Yes. Go to line 38. | , | C pp Di | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or commissions you alm | ready earned | | |
| | Yes. Describe | | | |
| 39. | Office equipment, furnishings, and supplied Examples: Business-related computers, softwar | | ines, rugs, telephones, desks, chairs, electror | nic devices |
| | ✓ No Yes. Describe | | | |
| | | | | |

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| Deb | tor 1 David | Foster Case number (if known) | |
|-------|-----------------------------------|---|---------------------------------------|
| 40. | First Name Machinery fixtures ac | Middle Name Last Name quipment, supplies you use in business, and tools of your trade | |
| 40. | | quipment, supplies you use in business, and tools of your trade | |
| | ✓ No Yes. Describe | | |
| | Tes. Describe | | |
| | | | |
| 41. | Inventory | | |
| | ✓ No | | |
| | Yes. Describe | | |
| | - | | |
| 42. | Interests in partnersh | ips or joint ventures | |
| | ✓ No | | |
| | Yes. Give specific | Name of entity: % of ownership: | |
| | information about | | <u> </u> |
| | them | | <u> </u> |
| | | | |
| 43. (| Customer lists, mailing | lists, or other compilations | _ |
| | ✓ No | | |
| | _ | aclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | | | |
| | ∐ No | , | |
| | Yes. Desc | ribe | |
| 44. | Any business-related | property you did not already list | |
| | ✓ No | | |
| | Yes. Give specific | | |
| | information | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | - | |
| 45. A | dd the dollar value of a | ıll of your entries from Part 5, including any entries for pages you have attached | |
| | | r here | |
| Pari | | Farm- and Commercial Fishing-Related Property You Own or Have an Intere | st In. |
| | If you own or have a | n interest in farmland, list it in Part 1. | |
| 46. | Do you own or have a | ny legal or equitable interest in any farm- or commercial fishing-related property? | |
| | No. Go to Part 7. | | Current value of the portion you own? |
| | Yes. Go to line 47. | | Do not deduct secured |
| | | | claims |
| 47 | Farm animals | | or exemptions |
| 47. | Examples: Livestock, po | ultry, farm-raised fish | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |
| | | | |

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| Debt | or 1 | David First Name Middle Name | Foster Last Name | Case number (if known) | |
|----------------|----------|---|--------------------------|--------------------------------|-------------|
| 48. | Cro | ps-either growing or harvested | Last Name | | |
| | V | No | | | |
| | H | Yes. Describe | | | |
| | _ | | | | |
| 49. | Far | m and fishing equipment, implements, machinery, fixt | ures and tools of trade | 2 | |
| 43. | _ | | ures, and tools of trade | 5 | |
| | | No Yes. Describe | | | |
| | ш | Tes. Describe | | | |
| | | | | | |
| 50. | _ | m and fishing supplies, chemicals, and feed | | | |
| | 뇓 | No Yea Bassilia | | | |
| | Ц | Yes. Describe | | | |
| | - | | | | |
| 51. | Any | r farm- and commercial fishing-related property you di | d not already list | | |
| | 뇓 | No . | | | |
| | Ц | Yes. Describe | | | |
| | - | | | · · | |
| 52. Ad | dd th | ne dollar value of all of your entries from Part 6, includ | ing any entries for page | es you have attached | |
| for Pa | art 6. | Write that number here | | > | |
| | | | | | |
| | | D 11 AUD / V O U | | D. I. N I A. | |
| Part 53 | | Describe All Property You Own or Have an I you have other property of any kind you did not alread | | I DIG NOT LIST Above | |
| | | mples: Season tickets, country club membership | y not: | | |
| | ✓ | No | | |] |
| | | Yes. Give specific | | | |
| | | information | | | |
| | | | | | |
| - | اء اءاء | and the control of all of communication from Port 7. Write 6 | h at | _ | |
| 54. AC | aa tr | ne dollar value of all of your entries from Part 7. Write t | nat number nere | | |
| | | | | | |
| Part 8 | 0. | List the Totals of Each Part of this Form | | | |
| rail | о. | List the lotals of Each Part of this Politi | | | |
| 55. P | art 1 | : Total real estate, line 2 | | > | |
| 56. p | art 2 | total vehicles, line 5 | 0.4.450.00 | | |
| | | : Total personal and household items, line 15 | \$1450.00 | <u> </u> | |
| | | | \$600.00 | <u> </u> | |
| | | : Total financial assets, line 36 | \$2.00 | <u> </u> | |
| 59. P | art 5 | 5: Total business-related property, line 45 | | <u> </u> | |
| 60. P | art 6 | 5: Total farm- and fishing-related property, line 52 | | <u></u> | |
| 61. P | art 7 | 7: Total other property not listed, line 54 | | | |
| 62. T | otal | personal property. Add lines 56 through 61 | \$2052.00 | | + \$2052.00 |
| | | | φ2002.00 | Copy personal property total ▶ | - Ψ2002.00 |
| | | | | | \$2052.00 |
| 63. T c | otal | of all property on Schedule A/B. Add line 55 + line 62 | | | |

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| Fill in this information to identify your case: | | | | | |
|---|-----------------------------|-------------|------------------------------|--|--|
| Debtor 1 | David | | Foster | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if fil | ing) First Name | Middle Name | Last Name | | |
| United States | s Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number (If known) | r | | (2.0.0) | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | Part 1: Identify the Property You Claim as Exempt | | | | | | |
|----------|---|---|---|------------------------------------|--|--|--|
| 1. 2. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | |
| | Brief description: used clothing Line from Schedule A/B: 11 | \$150.00 | \$150.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | |
| | Brief description: used furniture Line from Schedule A/B: 06 | \$400.00 | \$400.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | |
| 3. | Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) No Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes | | | | | | |

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| Debtor | 1 David | | Foster | Case number (if known) | |
|---------|--|---|-------------------------------|---|------------------------------------|
| | First Name Middl | e Name | Last Name | | |
| Part 2: | Additional Page | | | | |
| lin | ief description of the property and e on Schedule A/B that lists this operty | Current value of the portion you own Copy the value from Schedule A/B | | exemption you claim oox for each exemption. | Specific laws that allow exemption |
| Lin | ef scription: us bank ef from thedule A/B: 17 | \$1.00 | 100% of fair rapplicable st | \$1.00 market value, up to any atutory limit | 735 ILCS 5/12-1001(b) |
| Lin | ef scription: us bank ef from thedule A/B: 17 | \$1.00 | 100% of fair in applicable st | \$1.00 market value, up to any atutory limit | 735 ILCS 5/12-1001(b) |
| Lin | pe from the dule A/B: 07 | \$50.00 | 100% of fair in applicable st | \$50.00 market value, up to any atutory limit | 735 ILCS 5/12-1001(b) |

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| Fill in this info | rmation to identify your case |): | | | | |
|-----------------------|--|--|--|--|--|--------------------------------------|
| Debtor 1 | David | | Foster | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if fili | ing) First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| Case number | | | (State) | | | |
| (If known) | | | | | | |
| | Form 106D | | | · | | Check if this is a amended filing |
| Sched | ule D: Credit | ors Who Ha | ve Claims Secur | ed by Pro | perty | 12/1 |
| 1. Do any No. | nber (if known). creditors have claims secu | red by your property? | e entries, and attach it to this form | , , | | · |
| • | | or has more than one secur | ed claim, list the creditor separately | Column A | Column B | Column C |
| for eac | | editor has a particular claim, | list the other creditors in Part 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion |
| Credito | ar Gallery Inc r's Name 6 Cicero Ave | Describe the property t | hat secures the claim: | \$2,000.00 | \$1,450.00 | \$550.00 |
| | nber Street | Mercedes, Benz Value: As of the date you file, | \$1,450.00 the claim is: Check all that apply. | | | |
| Ciaara | Illinaia COOM | Contingent | | | | |
| <u>Cicero</u> City | State ZIP Code | Unliquidated | | | | |
| | owes the debt? Check one. | Disputed | | | | |
| | ebtor 1 only | Nature of lien. Check al | l that apply. | | | |
| | ebtor 2 only ebtor 1 and Debtor 2 only | An agreement you m car loan) | nade (such as mortgage or secured | | | |
| | least one of the debtors and other | | as tax lien, mechanic's lien) | | | |
| | orner neck if this claim relates | Judgment lien from a | a lawsuit | | | |
| — to | a community debt ebt was | Other (including a rig | tht to offset) | | | |
| incurre | | Last 4 digits of accour | t number | | | |
| | Add the dollar value of | your entries in Column A | on this page. Write that | \$2,000.00 | | |

number here:

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| Filli | n this inform | ation to identify your cas | e: | | | | | |
|---|--|--|--|--|---|---|--|---|
| Deb | tor 1 | David | | Foster | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | tor 2 | Circt Name | Mistalla Nassa | LastNassa | | | | |
| (Spc | iuse, ii iiiiig) |) First Name | Middle Name | Last Name | | | | |
| Unit | ed States Ba | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| Cas | e number | | | (State) | | | | |
| | iown) | | | | | | | |
| Off | icial Fo | orm 106E/F | | | | Cr | neck if this is a | n amended filing |
| <u> </u> | hadu | Jo E/E. Cro | ditore Who | Have Hace | urad Claima | | | |
| <u> </u> | neau | ile E/F: Cre | iditors write | nave unsec | cured Claims | | | 12/15 |
| party 106A that a entric know | to any exe /B) and on are listed in es in the bo n). | cutory contracts or un Schedule G: Executor Schedule D: Creditor oxes on the left. Attach | expired leases that could r y Contracts and Unexpired is Who Hold Claims Secur the Continuation Page to | result in a claim. Also list d Leases (Official Form 1 red by Property. If more so this page. On the top of | and Part 2 for creditors with executory contracts on School 06G). Do not include any cre- pace is needed, copy the Pa any additional pages, write | edule A/B editors with art you ne | 8: Property (C h partially se ed, fill it out, i | official Form cured claims number the |
| Part | 1: List A | All of Your PRIORI | TY Unsecured Claims | 3 | | | | |
| 1. | | | nsecured claims against yo | ou? | | | | |
| | No. G | o to Part 2. | | | | | | |
| | Yes. | | | | | | | |
| 2. | listed, ident much as po | tify what type of claim it is | If a claim has both priority a alphabetical order according | and nonpriority amounts, lis to the creditor's name. If yo | ured claim, list the creditor sep that claim here and show both ou have more than two priority recreditors in Part 2 | n priority an | d nonpriority a | mounts. As |
| | | • | claim, see the instructions for | • | | | | |

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| Debte | or 1 | | | Case number (if known) | |
|--------|---------|--|----------|---|-----------------|
| | | First Name Middle Name Last I | Name | | |
| Part 2 | 2: | List All of Your NONPRIORITY Unsecured Claims | ; | | |
| 3. | Dο | any creditors have nonpriority unsecured claims against you | 2 | | |
| J. | | No. You have nothing to report in this part. Submit this form to the | | with your other schodules | |
| | Н | | Court | with your other schedules. | |
| | ✓ | Yes. | | | |
| | | t all of your nonpriority unsecured claims in the alphabetical | | | |
| | | ecured claim, list the creditor separately for each claim. For each c | | | |
| | | ore than one creditor holds a particular claim, list the other creditors | s in P | art 3.If you have more than four priority unsecured claims fill out the | ne Continuation |
| | Pag | ge of Part 2. | | | |
| | | | | | Total claim |
| 4.1 | | HASE | Las | t 4 digits of account number | \$300.00 |
| | | onpriority Creditor's Name D Box 15298 | | en was the debt incurred? | |
| | - | umber Street | VVII | en was the debt incurred? | |
| | | | As | of the date you file, the claim is: Check all that apply. | |
| | | Paris et a | | Contingent | |
| | Ci | ilmington Delaware 19850 itv State Zip Code | П | Unliquidated | |
| | | The incurred the debt? Check one. | Ħ | Disputed | |
| | V | # 5 1 / / · | | · | |
| | Г | Debtor 2 only | іур | e of NONPRIORITY unsecured claim: | |
| | F | Debtor 1 and Debtor 2 only | Ш | Student loans | |
| | | ≟ | | Obligations arising out of a separation agreement or divorce | |
| | L | At least one of the debtors and another | | that you did not report as priority claims | |
| | | Check if this claim relates to a community debt | Ш | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls | the claim subject to offset? | V | Other. Specify bank fees | |
| | ~ | No | Y | Curior. Opening <u>Barily rees</u> | |
| | | Yes | | | |
| 4.2 | Ci | ty of Chicago Parking | | | \$4,757.00 |
| | No | onpriority Creditor's Name | | t 4 digits of account number | Ψ-, ι σι .σσ |
| | _ | 21 N. LaSalle St # 107A umber Street | Wh | en was the debt incurred?n/a | |
| | IN | uriber Street | As | of the date you file, the claim is: Check all that apply. | |
| | _ | | П | Contingent | |
| | _ | hicago Illinois 60602 | Ħ | Unliquidated | |
| | | ty State Zip Code | H | | |
| | V | /ho incurred the debt? Check one. Debtor 1 only | Ш | Disputed | |
| | Ë | Debtor 2 only | Тур | e of NONPRIORITY unsecured claim: | |
| | H | Debtor 1 and Debtor 2 only | | Student loans | |
| | F | <u>'</u> | | Obligations arising out of a separation agreement or divorce | |
| | L | At least one of the debtors and another | | that you did not report as priority claims | |
| | L | Check if this claim relates to a community debt | Ш | Debts to pension or profit-sharing plans, and other similar debts | |
| | | the claim subject to offset? | V | Other. Specify parking tickets | |
| | ¥ | | | | |
| | L | Yes | | | |
| 4.3 | | OMNWLTH FIN | Las | t 4 digits of account number 70N1 | \$621.00 |
| | | onpriority Creditor's Name 60 N MAIN STREET | | en was the debt incurred? 3/1/2016 | |
| | _ | umber Street | | | |
| | | | As | of the date you file, the claim is: Check all that apply. | |
| | S | CRANTON Pennsylvania 18508 | Ш | Contingent | |
| | Ci | , | Ш | Unliquidated | |
| | | /ho incurred the debt? Check one. | | Disputed | |
| | | | Тур | e of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | Student loans | |
| | | Debtor 1 and Debtor 2 only | H | | |
| | Ē | At least one of the debtors and another | Ш | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | F | Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar | |
| | ∟ Ie | the claim subject to offset? | _ | debts | |
| | J | No | ✓ | Collection; Collecting for | |
| | Ė | Yes | | ORIGINAL CREDITOR: Other. Specify MEDICAL | |
| | | | | | |

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Debtor 1 David Foster Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim DEBT RECOVERY SOLUTION** 4.4 \$931.00 Last 4 digits of account number _ Nonpriority Creditor's Name 900 Merchants Concourse # LL-11 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 11590 Westbury New York Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? **✓** 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: Other. Specify _ MEDICAL PAYMENT DATA Yes ENHANCED RECOVERY CO L 4.5 \$516.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 1/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Florida Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? 001 Collection; Collecting for |√| **V** No ORIGINAL CREDITOR: Other. Specify **TMOBILE** Yes ENHANCED RECOVERY CO L 4.6 \$237.00 Last 4 digits of account number _ Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? 001 Collection; Collecting for **✓** \checkmark No ORIGINAL CREDITOR:

Yes

Other. Specify

TMOBILE

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Debtor 1 David Foster Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** JEFFERSON CAPITAL SYST 4.7 \$1,615.00 Last 4 digits of account number Nonpriority Creditor's Name 16 MCLELAND RD When was the debt incurred? 4/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent SAINT CLOUD 56303 Minnesota Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify_ 001 UnknownLoanType **✓** No Yes PLS 4.8 \$700.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 8026 S Cicero Ave Number Street As of the date you file, the claim is: Check all that apply. Contingent 60459 Burbank Illinois Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? payday loan Other. Specify **✓** No Yes SOURCE RECEIVABLES MNG 4.9 \$1,146.00 Last 4 digits of account number Nonpriority Creditor's Name 4615 DUNDAS DR STE 102 When was the debt incurred? 10/1/2015 Number As of the date you file, the claim is: Check all that apply. Contingent **GREENSBORO** North Carolina 27407 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **✓ ✓** No ORIGINAL CREDITOR:

Yes

Other. Specify PEOPLES GAS LIGHT COKE CO

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Debtor 1 David Foster Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** SW CRDT SYS 4.10 \$546.00 Last 4 digits of account number Nonpriority Creditor's Name 2629 DICKERSON PK When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent CARROLLTON 75007 Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? 001 Collection; Collecting for **✓** No ORIGINAL CREDITOR: 10 COM Other. Specify ED Yes 4.11 TCF Bank \$130.00 Last 4 digits of account number Nonpriority Creditor's Name 919 Estes Court When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Schaumburg Illinois 60193 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: ✓ Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts bank fees ✓ Other. Specify Is the claim subject to offset? **✓** No Yes **WESTLAKE FIN** 4.12 \$9,421.00 Last 4 digits of account number Nonpriority Creditor's Name 4751 WILSHIRE BVLD SUITE 100 When was the debt incurred? 2/1/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent LOS ANGELES 90010 California Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed | ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify 49 Automobile **V** No

Yes

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| tor 1 David | | | Foster | Case | number (if known) |
|------------------|---------------------|------------------------|------------------------------------|----------------------|---|
| First Name | | Middle Name | Last Name | | |
| 3: List Others | s to Be Notified | About a Debt T | hat You Already | Listed | |
| | | | | | |
| Use this page on | ly if you have othe | rs to be notified ab | out your bankruptcy | ,, for a debt that y | ou already listed in Parts 1 or 2. For example, if a |
| • | , , , | • | • | , | original creditor in Parts 1 or 2, then list the collection |
| | | | | | d in Parts 1 or 2, list the additional creditors here. If |
| you do not nave | additional persons | s to be notified for a | any debts in Parts 1 | or 2, do not fill o | out or submit this page. |
| Peoples Gas | | | | | |
| Name | | | On which enti | ry in Part 1 or Par | rt 2 did you list the original creditor? |
| 200 E. Randolph | | | Line 4.9 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Number Stree | et | | | one): | Part 2: Creditors with Nonpriority Unsecured |
| | | | <u> </u> | | Claims |
| Chicago | Illinois | 60601 | Last 4 digits of | of account numb | per 9739 |
| City | State | Zip Code | | | |
| ComEd | | | | | |
| Name | | | On which enti | ry in Part 1 or Par | rt 2 did you list the original creditor? |
| 3 Lincoln Center | | | Line 4.10 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Number Stree | et | | | one): | Part 2: Creditors with Nonpriority Unsecured |
| | | | | | Claims |
| Oakbrook Terrace | Illinois | 60181 | | of account numb | ner 3618 |
| Canbrook Terrace | 11111013 | 00101 | Last 4 digits (| of account numb | er <u>3016</u> |
| City | State | Zip Code | | | |
| TMobile | | | | | |
| Name | | | On which enti | ry in Part 1 or Par | rt 2 did you list the original creditor? |
| P.O. Box 742596 | | | Line 4.5 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Number Stree | et | | <u> </u> | one): | ✓ Part 2: Creditors with Nonpriority Unsecured |
| | | | | | Claims |
| Cincinnati | Ohio | 45274 | Last 4 digits (| of account numb | er 8382 |
| City | State | Zip Code | ================================== | J. adoodin namb | |

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David Foster Debtor 1 Case number (if known) First Name Middle Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar 6h. \$20,920.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$20,920.00 6j. Total. Add lines 6f through 6i. 6 j.

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| Fill in this information to identify your case: | | | | | | | | |
|---|------------|-----------------------|------------------------------|--|--|--|--|--|
| Debtor 1 | David | | Foster | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | | | | | | | | |
| (Spouse, if filing) First Name | | Middle Name Last Name | | | | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | | | | |
| Case number (If known) | | | (Giaic) | | | | | |

Official Form 106G

| Check if this is ar |
|---------------------|
| amended filing |

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or compar | ny with whom you have th | ne contract or lease | State what the contract or lease is for |
|-----|----------------------------------|--------------------------|----------------------|--|
| 2.1 | Unknown Last Name, Betty Name | | | Other, Other, 1 year residential lease |
| | 8148 S Artesian | | | |
| | Number | Street | | |
| | Chicago | Illinois | 60652 | |
| | City | State | Zip Code | |

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| Fill in this inf | ormation to identify your cas | se: | | |
|-----------------------------|---|--|--|--|
| Debtor 1 | David | | Foster | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | ling) = | | | |
| (Spouse, if fi | ling) First Name | Middle Name | Last Name | |
| United State | s Bankruptcy Court for the: | Northern | District of Illinois | |
| 0 | _ | | (State) | |
| Case numbe (If known) | | | | |
| | | | | Check if this is ar |
| | | | | amended filing |
| Official | Form 106H | | | |
| | _ | - d - b + - v - | | |
| <u>scneal</u> | ule H: Your C | odeptors | | 12/15 |
| Yes 2. Within to Idaho, Lo | s: the last 8 years, have you ouisiana, Nevada, New Mex b. Go to line 3. s. Did your spouse, former s | lived in a community properties, Puerto Rico, Texas, Was | shington, and Wisconsin.) re with you at the time? | debtor.) mmunity property states and territories include Arizona, California, the name and current address of that person. |
| | Name of your spouse, | former spouse, or legal equiv | alent | _ |
| | Number Street | | | _ |
| | City | State | Zip Code | _ |
| again as | s a codebtor only if that p | erson is a guarantor or co | signer. Make sure you hav | our spouse is filing with you. List the person shown in line 2 re listed the creditor on <i>Schedule D</i> (Official Form 106D), rele D, Schedule E/F, or Schedule G to fill out Column 2. |
| Column | 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt |

Official Form 106H Schedule H: Your Codebtors page 1

Check all schedules that apply:

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| Fill in this i | unfarmantiam to inlamatif | | | | | |
|--|---|---|-------------------------------|-------------------|--------------------|--|
| | nformation to identif | y your case. | Frater | | | |
| Debtor 1 | David First Name | Middle Name | Foster Last Nar | ne | _ | |
| Debtor 2 | . not riamo | aa.o . tao | 20011101 | | | Check if this is: |
| (Spouse, if filir | ^{ng)} First Name | Middle Name | Last Nar | ne | _ | An amended filing |
| United States | Bankruptcy Court for the: | Northern | District of Illing | | _ | A supplement showing post-petition chapter 1 expenses as of the following date: |
| Case number (If known) | | | (5.5 | | _ | MM / DD / YYYY |
| Official | Form 106I | | | | | |
| Schedu | ıle I: Your İnd | come | | | | 12/1 |
| include info additional p | ormation about you | r spouse. If more spa ame and case numbe | ce is needed | l, attach a s | separate she | se is not filing with you, do not eet to this form. On the top of any |
| | l in your employment | | Debtor 1 | | | Debtor 2 |
| | formation. rou have more than one o, | Employment status | Employed Not Employed | | | Employed Not Employed |
| | ach a separate page with ormation about additional | Occupation | | | | |
| | nployers. | Employer's name | Horween Lea | ather Co. | | - |
| or | clude part time, seasonal, If-employed work. | Employer's address | 2015 N Elsto Number Street | n | | Number Street |
| | ccupation may include | | | | | |
| or | homemaker, if it applies. | | Chicago City | Illinois State | 60614 Zip Code | City State Zip Code |
| | | How long employed there? | 2 years | | | |
| Estimate moyou are sepa If you or your attach a sepa | rated. ron-filing spouse have morarate sheet to this form. | date you file this form. If your than one employer, comb | ine the information | for all employe | ers for that perso | the space. Include your non-filing spouse unless on on the lines below. If you need more space, For Debtor 2 or non-filing spouse |
| | | ry, and commissions (befor alculate what the monthly wag | | <u> </u> | \$2,935.18 | |
| 3. Estima | te and list monthly over | time pay. | 3 | l | + \$0.00 | |

\$2,935.18

4. Calculate gross income. Add line 2 + line 3.

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| Debtor 1 David | Foster | Case number (if | known) | |
|--|-----------------------|---------------------------|-----------------------------------|-------------------------|
| First Name Middle Name | Last Name | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line 4 here → | 4. | \$2,935.18 | | |
| 5. List all payroll deductions: | | | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | \$588.64 | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | |
| 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | |
| 5e. Insurance | 5e. | \$17.33 | | |
| 5f. Domestic support obligations | 5f. | \$0.00 | | |
| 5g. Union dues | 5g. | \$0.00 | | |
| 5h. Other deductions. Specify: | _ | \$0.00 + | | |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + | _ | \$605.97 | | |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + +5h. | -5f + 5g 6 | φουο.97 | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from lin | e 4. 7 | \$2,329.21 | | |
| 8. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing g | iross | | | |
| receipts, ordinary and necessary business expenses, and the monthly net income. | | \$0.00 | | |
| 8b. Interest and dividends | 8b | \$0.00 | | |
| 8c. Family support payments that you, a non-filing spouse, dependent regularly receive | or a | | | |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c | \$0.00 | | |
| 8d. Unemployment compensation | 8d | \$0.00 | | |
| 8e. Social Security | 8e | \$0.00 | | |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-ca assistance that you receive, such as food stamps (benefits unc the Supplemental Nutrition Assistance Program) or housing subsidies | der | #0.00 | | |
| Specify: | _ | \$0.00 | | |
| 8g. Pension or retirement income | 8g | \$0.00 | | |
| 8h. Other monthly income. Specify: | | \$0.00 + | | |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g | + 8h. 9 | \$0.00 | | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing s | spouse 10. | \$2,329.21 + | = | \$2,329.21 |
| 11. State all other regular contributions to the expenses that y Include contributions from an unmarried partner, members of your relatives. Do not include any amounts already included in lines 2-10 or amo | household, your deper | ndents, your roommates, a | | |
| Specify: | | , | 11. | + \$0.00 |
| · · | | | | |
| 12. Add the amount in the last column of line 10 to the amoun. Write that amount on the Summary of Schedules and Statistical S. | | | | \$2,329.21 |
| | | | | Combined monthly income |
| 13. Do you expect an increase or decrease within the year after | you file this form? | | | |
| ✓ No. | | | | |
| Yes. Explain: | | | | |
| _ | | | | |

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| Fill in this info | ormation to identify y | our case: | | | | |
|--------------------|--|---|--|---|------------|--------------|
| Debtor 1 | David | | Foster | | | |
| 202.0 | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | Check if this is: | | |
| (Spouse, if fill | ing) First Name | Middle Name | Last Name | An amended filing | g | |
| United States | Bankruptcy Court fo | or the: Northern | District of Illinois (State) | A supplement she expenses as of the | • | • |
| Case number | r | | . , , | , | 3 | |
| (If known) | | | | MM / DD / YYYY | , | |
| Official | Form 106 | 6J | | | | |
| | | r Expenses | | | | 12/1 |
| information. I | | s possible. If two married people a eeded, attach another sheet to this | | | | number |
| | scribe Your Ho | | | | | |
| 1. Is this a jo | | usenoiu | | | | |
| | So to line 2 | | | | | |
| | | in a separate household? | | | | |
| L les. I | | in a separate nousenou: | | | | |
| | ∐ No | | | | | |
| | Yes. Debtor 2 i | must file Official Forms 106J-2, <i>Exper</i> | nses for Separate Household of Debto | or 2. | | |
| 2. Do you ha | | ✓ No | | | | |
| | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does deper | ndent live |
| | xpenses include of people other | ✓ No | | | | |
| than yourself a | | Yes | | | | |
| depender | nts? | | | | | |
| Part 2: Est | timate Your On | going Monthly Expenses | | | | |
| _ | s of a date after the | your bankruptcy filing date unless e bankruptcy is filed. If this is a su | | • | - | |
| | • | n non-cash government assistance luded it on <i>Schedule I: Your Incon</i> | • | | Y | our expenses |
| | al or home owners for the ground or lot | hip expenses for your residence. It | nclude first mortgage payments and | | 4. | \$600.00 |
| If not in | cluded in line 4: | | | | | |
| 4a. Real | estate taxes | | | | 4a | \$0.00 |
| 4b. Prop | erty, homeowner's, | or renter's insurance | | | 4b. | \$0.00 |
| 4c. Home | e maintenance, repa | ir, and upkeep expenses | | | 4c. | \$0.00 |
| 4d. Hom | eowner's association | n or condominium dues | | | 4d. | \$0.00 |

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Debtor 1

Foster David Case number (if known) First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$300.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$175.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$350.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$50.00 10. Personal care products and services \$50.00 10. 11. Medical and dental expenses \$10.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$294.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$0.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: child support not court ordered for 2 children \$300.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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| Debtor 1 | David | | Foster | Case number (if known) | | |
|-------------------|-------------------------|---------------------------------------|---------------------------------|------------------------|-----|------------|
| | First Name | Middle Name | Last Name | | | |
| 21.Other | Specify: | | | | 21 | \$0.00 |
| | | | | | | |
| 22. Calcu | late your monthly e | xpenses. | | | | \$2,129.00 |
| 22a. <i>F</i> | add lines 4 through 21 | | | | | \$0.00 |
| 22b. C | Copy line 22 (monthly e | expenses for Debtor 2), if any, fro | m Official Form 106J-2 | | | \$2,129.00 |
| 22c. A | dd line 22a and 22b. | The result is your monthly expens | ses. | | 22. | |
| 23.Calcu | late your monthly n | et income. | | | | |
| 23a. C | Copy line 12 (your com | nbined monthly income) from Sch | edule I. | | 23a | \$2,329.21 |
| 23b. C | copy your monthly exp | enses from line 22 above. | | | 23b | \$2,129.00 |
| | | expenses from your monthly inco | me. | | | \$200.21 |
| • | The result is your mon | nthly net income. | | | 23c | |
| 24. Do y o | ou expect an increas | se or decrease in your expens | es within the year after you | u file this form? | | |
| | | ct to finish paying for your car loar | | | | |
| mort | gage payment to incre | ease or decrease because of a n | nodification to the terms of yo | our mortgage? | | |
| ✓ 1 | No | | | | | |
| | ⁄es | | | | | |
| | Explain here: | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Fill in this inforn | nation to identify your cas | e: | | |
|---------------------------|-----------------------------|-------------|----------------------|--|
| Debtor 1 | David | | Foster | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing | First Name | Middle Name | Last Name | |
| United States B | ankruptcy Court for the: | Northern | District of Illinois | |
| Case number (If known) | | | (State) | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Pai | t1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to h | help you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and |
| • | · | × |
| X | /s/ David Foster Signature of Debtor 1 | Signature of Debtor 2 |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 9/14/2016 | Date |
| | MM/DD/YYYY | MM/DD/YYYY |

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| | n thin i | nformation to id | ontify years on | | | | | | |
|-----------|--------------------|---------------------------|-----------------|-------------------------|-------------------------------|------------------|-----------------|-------------------|------------------------------|
| FIII | n tnis i | nformation to id | entily your ca | ise: | | | | | |
| Deb | otor 1 | David | | | Foster | | - | | |
| Dob | tor 2 | First Nan | ne | MIGGIE | Name Last Nan | ne | | | |
| | otor 2 ouse, if | filing) First Nan | ne | Middle | Name Last Nan | ne | - | | |
| Unit | ed Sta | tes Bankruptcy | Court for the | Northern | District of Illino | nis | | | |
| | | | Court for the. | 1101110111 | (Sta | | - | | |
| | e numl nown) | ber | | | | | | | |
| | <u> </u> | | | | | | | | Check if this is a |
| <u>Ot</u> | ficia | al Form | 107 | | | | | | amended filing |
| Sta | ater | ment of | Financ | cial Affair | s for Individu | als Filin | g for Ba | ankruptcy | 12/1 |
| Be a | s com | plete and accu | rate as poss | sible. If two marri | ed people are filing togeth | er. both are eq | ually responsi | ble for supplying | correct information. If more |
| spac | e is ne | | | | On the top of any addition | | | | |
| ques | tion. | | | | | | | | |
| Par | 11: 0 | Give Details | About You | ur Marital Stat | us and Where You Liv | ved Before | | | |
| _ | \A/I | -4 ! | | .4-42 | | | | | |
| 1. | vvn | at is your curre | ent maritai s | status? | | | | | |
| | | Married | | | | | | | |
| | ✓ | Not married | | | | | | | |
| 2. | Dur | ing the last 3 y | ears, have y | ou lived anywher | e other than where you live | e now? | | | |
| | | N ₂ | | - | • | | | | |
| | 넴 | No Vae Liet all of the | he nlaces voi | ı lived in the last 3 ı | years. Do not include where y | ou live now | | | |
| | ш | ros. List all of t | no piaces yet | | years. De net moidde where y | od live new. | | | |
| | | Debtor 1: | | | Dates Debtor 1 lived | Debtor 2: | | | Dates Debtor 2 lived |
| | | Debior 1. | | | there | Debior 2. | | | there |
| | | | | | | | | | |
| | | | | | | Same a | s Debtor 1 | | Same as Debtor 1 |
| | | - | | | From | - | | | From |
| | | Number Street | İ | | | Number Str | eet | | |
| | | | | | To | | | | To |
| | | O:t | Otata | 7:- C- d- | | O:t | Ctata | 7:- O- d- | |
| | - | City | State | Zip Code | | City | State | Zip Code | |
| | | | | | | Same a | s Debtor 1 | | Same as Debtor 1 |
| | | | | | From | | | | From |
| | | Number Street | I | | | Number Str | eet | | |
| | | | | | To | | | | То |
| | | City | Stata | Zin Codo | | City | Ctoto | Zin Codo | |
| | - | City | State | Zip Code | | City | State | Zip Code | |
| | | - | | - | oouse or legal equivalent i | - | | - ' | mmunity property states and |
| | territo | ries include Ariz | ona, Californ | ıa, Idaho, Louisian | a, Nevada, New Mexico, Pue | erto Rico, Texas | , Washington, a | nd Wisconsin.) | |
| | | | | | | | | | |

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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| Debt | | e Name Last Na | | umber (if known) | |
|---------|--|--|---|--|--|
| Part | 2: Explain the Sources of Your | Income | | | |
| 4. | Did you have any income from employn Fill in the total amount of income you receiv activities. If you are filing a joint case and you No Yes. Fill in the details. | nent or from operating a bu | esses, including part-time | | ears? |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | From January 1 of current year until the date you filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | \$21000.00 | Wages, commissions, bonuses, tips Operating a business | |
| | For last calendar year: (January 1 to December 31, 2015) | Wages, commissions, bonuses, tips Operating a business | \$36000.00 | Wages, commissions, bonuses, tips Operating a business | |
| | For the calendar year before that: (January 1 to December 31, 2014) | Wages, commissions, bonuses, tips Operating a business | \$20000.00 | Wages, commissions, bonuses, tips Operating a business | |
| li b | Did you receive any other income during include income regardless of whether that incenefit payments; pensions; rental income; incase and you have income that you received distributed income that you received in the gross income from the younger of the younger of the younger of younger | come is taxable. Examples of nterest; dividends; money coll together, list it only once unde | other income are alimony; chected from lawsuits; royalties er Debtor 1. | ; and gambling and lottery win | |
| | | Debtor 1 | | Debtor 2 | |
| | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | From January 1 of current year until the date you filed for bankruptcy: | | | | |
| | For last calendar year: (January 1 to December 31, 2015 YYYY |) | | | |
| | For the calendar year before that: (January 1 to December 31, 2014 YYYY |) | | | |
| | | | | | |

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| F | irst Name | | Middle Name | Foster Last Name | Case num | | |
|-----------------|---|---------------|---|--|--|---------------------------------|--|
| Li | ist Certain | Pavmen | its You Made F | Before You Filed for | Bankruptcy | | |
| | ist ocitain | i i ayıncı | its fou made i | Sciole lou i lieu loi | Bankraptoy | | |
| e eitl | her Debtor 1 | 's or Debto | or 2's debts prima | arily consumer debts? | | | |
| No | | | Debtor 2 has pri I, family, or househ | | Consumer debts are defined | l in 11 U.S.C. § 101(8) as "inc | urred by an individual |
| | During the | 90 days bef | ore you filed for ba | nkruptcy, did you pay any c | reditor a total of \$6,425* or m | ore? | |
| | ☐ No. G | o to line 7. | | | | | |
| | Yes. | l ist below e | ach creditor to who | m you paid a total of \$6.425 | 5* or more in one or more pa | ments and the | |
| | 1 | total amoun | t you paid that cred | ditor. Do not include payme | nts for domestic support obli to an attorney for this bankru | gations, such as | |
| | * Subject to | adjustment | t on 4/01/19 and ev | ery 3 years after that for ca | ses filed on or after the date | of adjustment. | |
| Yes | s. Debtor 1 o | or Debtor 2 | or both have pri | marily consumer debts. | | | |
| _ | | | _ | - | reditor a total of \$600 or more | 27 | |
| | _ | | oro you mou for ba | Thraptoy, and you pay arry of | Total of total of the or the or | ·· | |
| | | o to line 7. | | | | | |
| | 1 | that creditor | . Do not include pa | ayments for domestic suppo ayments to an attorney for the | or more and the total amount ort obligations, such as child nis bankruptcy case. | support and | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| Cr | reditor's Nam | ie. | | | | | Mortgage |
| | | | | | | | |
| _ | | | | | | | Car |
| Nu | umber Street | | | | | | Credit card |
| Nu | umber Street | | | | | | Credit card Loan repayme |
| Nu Cir | | State | Zip Code | | | | Credit card |
| _ | | State | Zip Code | | | | Credit card Loan repayme Suppliers or |
| Ci | | | Zip Code | | | | Credit card Loan repayme Suppliers or vendors |
| Ci | ity reditor's Nam | | Zip Code | | | | Credit card Loan repayme Suppliers or vendors Other Mortgage Car |
| Ci | ity | | Zip Code | | | | Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card |
| Ci | ity reditor's Nam | | Zip Code | | | | Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme |
| Ci | reditor's Nam | | Zip Code | | | | Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card |
| Cr | reditor's Nam | e | | | | | Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or |
| Cir Cr Nu | reditor's Nam umber Street | e State | | | | | Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors |
| Cir Cr Nu | reditor's Nam | e State | | | | | Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors Other |
| Cir Cr Cr Cr Cr | reditor's Nam umber Street | State | | | | | Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card |
| Cir Cr Cr Cr Cr | reditor's Nam umber Street ity | State | | | | | Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Car Credit card Loan repayme Loan repayme |
| Cir Cr Cr Cr Cr | reditor's Nam umber Street ity reditor's Nam umber Street | State | | | | | Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card Loan repayme Suppliers or vendors Other Mortgage Car Credit card |

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| First Name | Debtor 1 | David | | | Fo | oster | Case number (| (if known) |
|--|--------------------|---|--|---|-------------------------------------|---|--|---|
| Insider include your relatives; any general partners; relatives of any general partners; corporations of which you are a peneral partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No No State Zip Code Dates of payment Dates of | | | | Middle Name | | | | |
| Dates of payment to an insider. Dates of payment Date of payment Date of payment Date of payment Date of payment Date of payment Date of payment Date of payment Date of payment Date of payment Date of Date of Date of Date of Payment Date o | Insi cor age | ders include your re porations of which y ent, including one fo | elatives; an rou are an or r a busines | y general partners; officer, director, per s you operate as a | relatives of any rson in control, o | general partners; par r owner of 20% or mo | tnerships of which y ore of their voting se | ou are a general partner; curities; and any managing |
| Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Dates of payment Dates of payment Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code | V | | | : | | | | |
| Number Street City State Zip Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Amounty ou still owe Reason for this payment insider or payment. Insider's Name Number Street City State Zip Code | | res. List all payme | ents to an ir | nsider. | | | | Reason for this payment |
| Insider's Name Number Street | | Insider's Name | | | | | | |
| Insider's Name Number Street City State Zip Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment Dates of pa | | Number Street | | | | | | |
| Number Street City State Zip Code 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. V No Yes. List all payments that benefited an insider. Dates of payment Paid Amount you still owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street | | City | State | Zip Code | | | | |
| State Zip Code | | Insider's Name | | | | | | |
| 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No | | Number Street | | | | | | |
| Insider's Name Number Street Insider's Name Number Street Number Street Number Street Number Street Number Street Number Street | | City | State | Zip Code | | | | |
| Yes. List all payments that benefited an insider. Dates of payment paid Total amount paid Still owe Reason for this payment Include creditor's name Insider's Name City State Zip Code Insider's Name Number Street | insi | der? | | | | payments or trans | fer any property o | n account of a debt that benefited an |
| Insider's Name City State Zip Code Insider's Name Number Street | ✓ | | nts that be | nefited an insider. | | | | |
| Number Street City State Zip Code Insider's Name Number Street | | | | | | | | |
| Number Street City State Zip Code Insider's Name Number Street | | | | | | | | |
| City State Zip Code Insider's Name Number Street | | Insider's Name | | | | - | | |
| Insider's Name Number Street | | Number Street | | | | | | |
| Number Street | | City | State | Zip Code | | | | |
| | | Insider's Name | | | | | | |
| City State Zip Code | | Number Street | | | | | | |
| | | City | State | Zip Code | | | | |

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| Deb | otor 1 | David | | | Foster | C | ase number (if | known) | |
|-----|-----------------------|---|-------------------------|------------|----------------------------------|-------------------|----------------|----------|-------------------------------------|
| | | First Name | Middle Nam | е | Last Name | | | | |
| Par | t 4: | Identify Legal | Actions, Reposse | ssions, a | and Foreclosure | S | | | |
| | With List a | in 1 year before yo | ou filed for bankruptcy | , were you | a party in any laws: | uit, court action | | | ng? r custody modifications, and |
| | | No Yes. Fill in the detai | ls. | | | | | | |
| | | | | Nature | of the case | Court or a | agency | | Status of the case |
| | | Case title | | | | | | | Pending |
| | | | | | | Court Nam | ne | | On appeal |
| | | Case number | | | | NumberStr | reet | | Concluded |
| | | | | | | | | | |
| | | | | | | City | State | Zip Code | |
| | | Case title | | | | | | | Pending |
| | | | | | | Court Nam | ne | | On appeal |
| | | Case number | | | | NumberStr | reet | | Concluded |
| | | | | | | City | State | Zip Code | |
| | | No. Go to line 11. Yes. Fill in the info | rmation below. | | Describe the prop | erty | | Date | Value of the property |
| | | | | | | | | | property |
| | | Creditor's Name | | | Explain what happ | ened | | | |
| | | Number Street | | | | | | | |
| | | | | | Property was re | | | | |
| | | | | | Property was for Property was ga | | | | |
| | | City | State Zip Co | ode . | Property was at | | or levied. | | |
| | | | | | Describe the prop | erty | | Date | Value of the property |
| | | | | | | | | | |
| | | Creditor's Name | | | Explain what happ | ened | | | |
| | | Number Street | | | | | | | |
| | | | | | Property was re | | | | |
| | | | | | Property was fo | | | | |
| | | City | State Zip Co | ode | Property was ga | | or levied. | | |
| | | 9 | =,5 00 | - | | , , | | | |

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| Debt | or 1 | David First Name | Middle Name | Foster Last Name | Case number (if known) | | |
|------|----------|--|--------------------------|-----------------------------|---------------------------------|--------------------------|--------------------|
| 11. | | nin 90 days before you filed ounts or refuse to make a pa | | | ank or financial institution, s | et off any amoun | nts from your |
| | | No Yes. Fill in the details. | | | | | |
| | | | | Describe the action the | e creditor took | Date action was taken | Amount |
| | | Creditor's Name | | | | | |
| | | Number Street | | Last 4 digits of account n | umber: XXXX- | | |
| | | City State | Zip Code | • | | | |
| | | nin 1 year before you filed fo ointed receiver, a custodian | | of your property in the | oossession of an assignee fo | or the benefit of c | reditors, a court- |
| | ✓ | No Yes | | | | | |
| Part | 5: | List Certain Gifts and | Contributions | | | | |
| 13. | Wi | thin 2 years before you filed | l for bankruptcy, did yo | ou give any gifts with a to | otal value of more than \$600 | per person? | |
| | Ī | Yes. Fill in the details for each | ch gift. | | | | |
| | | Gifts with a total value of r per person | more than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | Person to Whom You Gave th | ne Gift | | | | |
| | | | | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person to Whom You Gave the | ne Gift | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Person's relationship to you | | | | | |

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| Debt | or 1 | David | | | Foster | Case number (if known |) | |
|------|------|--|------------------|---------------------|--|----------------------------|-----------------------------------|--------------------|
| | | First Name | | Middle Name | Last Name | | | |
| 14. | Wit | hin 2 vears before vo | ou filed for | · bankruptcv. did v | you give any gifts or contributi | ons with a total value o | f more than \$600 | o any charity? |
| | _ | No | | | , o a g o a, g o o . o o | | | |
| | 뵘 | Yes. Fill in the details | for each a | ift or contribution | | | | |
| | ш | | | | December of the control of the contr | | D-1 | Makes |
| | | Gifts or contribution that total more than | | rities | Describe what you contrib | uted | Date you contributed | Value |
| | | that total more than | 11 \$000 | | | | Continuated | |
| | | | | | | | | |
| | | Charity's Name | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | Number Street | | | | | | |
| | | City | State | 7in Codo | | | | |
| | | City | State | Zip Code | | | | |
| Part | 6: | List Certain Los | ses | | | | | |
| | | nin 1 year before you abling? No Yes. Fill in the details. | | oankruptcy or sin | ce you filed for bankruptcy, did | you lose anything bec | ause of theft, fire, | other disaster, or |
| | | Describe the prope | erty you los | st and | Describe any insurance co | verage for the loss | Date of your | Value of property |
| | | how the loss occur | | | Include the amount that insura | | loss | lost |
| | | | | | pending insurance claims on | line 33 of Schedule | | |
| | | | | | A/B: Property. | | | |
| | | | | | | | | |
| | | ut seeking bankrupto de any attorneys, ban No Yes. Fill in the details. | kruptcy pet | | credit counseling agencies for sen | vices required in your bar | kruptcy. | |
| | | res. I ili ili de detallo. | • | | Description and value of a transferred | ny property | Date payment or transfer was made | Amount of payment |
| | | Semrad Law Firm | | | Attorney's Fee - 0.00 | | 9/14/2016 | \$0.00 |
| | | Person Who Was Pa | id | | Audiney 31 de - 0.00 | | 9/14/2010 | ψ0.00 |
| | | 20 South Clark Stree | | r | | | | |
| | | Number Street | | | | | | |
| | | | | | | | | |
| | | Chinama III | II::- | 00000 | | | | |
| | | | Ilinois State | Zip Code | | | | |
| | | Oity | Jaic | Zip Coue | | | | |
| | | Email or website add | lress | | | | | |
| | | Person Who Made th | ne Payment | , if Not You | | | | |
| | | Person Who Was Pa | iid | | | | | |
| | | Number Street | | | | | | |
| | | | | | | | | |
| | | City | State | Zip Code | | | | |
| | | | | | | | | |
| | | Email or website add | Iress | | | | | |
| | | Person Who Made th | e Payment | if Not You | | | | |

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| Deb | tor 1 | David | | Foster | Case number (if known) | |
|-----|-------|--|------------------------|---|--|----------------------------------|
| | | First Name | Middle Name | Last Name | | |
| 17. | help | o you deal with your creditor not include any payment or tran No | s or to make payments | s to your creditors? | our behalf pay or transfer any property | to anyone who promised to |
| | ш | Yes. Fill in the details. | | | | |
| | | | | Description and value of transferred | any property Date payment o transfer wa made | |
| | | Person Who Was Paid | | | | |
| | | Number Street | | | | |
| | | City State | Zip Code | | | |
| | | Oity Olato | Zip Code | | | |
| | Inclu | ordinary course of your bus ude both outright transfers and sfers that you have already liste No Yes. Fill in the details. | transfers made as secu | | security interest or mortgage on your pro | perty). Do not include gifts and |
| | | | | Description and value of property transferred | any Describe any property or payments received or de in exchange | |
| | | Person Who Received Trans | fer | | | |
| | | Number Street | | | | |
| | | City State Person's relationship to you | Zip Code | | | |
| | | Person Who Received Trans | fer | | | |
| | | Number Street | | | | |
| | | City State Person's relationship to you | Zip Code | | | |
| 19. | | hin 10 years before you filed ese are often called asset-prote | | ou transfer any property to | a self-settled trust or similar device of | which you are a beneficiary? |
| | | No Yes. Fill in the details. | | | | |
| | | | | Description and value of | of the property transferred | Date transfer was made |
| | | Name of trust | | | | |

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| ebtor 1 | David First Name | | Middle Name | Foster Last Name | Cas | e number (if known) | | |
|------------|--|----------------------|--------------------|---|----------------------|-------------------------|--|--|
| | | -: | | | anit Davis an | d Ctorono Unito | | |
| art 8: | List Certain i | -inanciai A | ccounts, ins | struments, Safe Dep | osit Boxes, an | id Storage Units | | |
| mo Incl | ved, or transferr | ed? ings, money m | arket, or other fi | ere any financial account nancial accounts; certificate utions. | | - | - | |
| | No - | | | | | | | |
| ✓ | Yes. Fill in the de | etails. | | | | | | |
| | | | | Last 4 digits of acc number | instru | of account or ment | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | CHASE | | | XXXX-0000 | ✓ Ch | hecking | 07/2016 | \$ -300.00 |
| | Person Who Wa PO Box 15298 | s Paid | | | ☐ Sa | avings | | |
| | Number Street | | | _ | Months Months | oney market | | |
| | | | | | □ Br | okerage | | |
| | VA/Slassia autom | Dalassana | 40050 | _ | Ot | ther | | |
| | Wilmington City | Delaware State | 19850 Zip Code | _ | | | | |
| | TCF Bank | | <u> </u> | XXXX-0000 | | hooking | 07/0040 | f 400.00 |
| | Person Who Wa | s Paid | | — XXXX-0000 | = | hecking | 07/2016 | \$ -130.00 |
| | 919 Estes Court | | | _ | = | avings | | |
| | Number Street | | | | = | oney market | | |
| | - | | | _ | | okerage ther | | |
| | Schaumburg | Illinois | 60193 | <u> </u> | | u ici | | |
| | City | State | Zip Code | | | | | |
| oth | er valuables? No Yes. Fill in the de | etails. | | Who else had access | s to it? | Describe the con- | tents | Do you still have it? |
| | Name of Finance | sial Inatitution | | Nome | | | | ☐ No |
| | Name of Finance | เลเ แรแนนิดก | | Name | | | | Yes |
| | Number Street | | | Number Street | | | | _ |
| | | | | City State | Zip Code | | | |
| | 0.7 | 01-1- | 7:- 0 - 1- | , | , | | | |
| | City | State | Zip Code | | | | | |
| . Hav | e you stored pro | perty in a sto | orage unit or pl | ace other than your hom | ne within 1 year bef | fore you filed for bank | ruptcy? | |
| ./ | No | | | | | | | |
| Ħ | Yes. Fill in the de | etails. | | | | | | |
| | | | | Who else had access | s to it? | Describe the con- | tents | Do you still have it? |
| | | | | Nama | | | | |
| | Nome of Ctarre | | | Name | | | | l No |
| | Name of Storag | e Facility | | | | | | ☐ No |
| | Name of Storag Number Street | је ғасіііту | | Number Street | | | | = |
| | - | је ғасіііту | | - | Zip Code | | | = |
| | - | State | Zip Code | - | Zip Code | | | = |

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| | David | Foste | | | e number (if known) | |
|---------|--|--|--|------------------|--|----------------|
| | First Name Middle Name | Last N | Name | | | |
| rt 9: | Identify Property You Hold or Co | ntrol for Someo | ne Else | | | |
| . D- | ver hold as control any managers that con | saana alaa auma? In | aluda anu n | | annewal from the starting for the late | in turnet fear |
| | you hold or control any property that son meone. | ieone eise owns? in | iciude any p | roperty you t | orrowed from, are storing for, or fiold | in trust for |
| _ | Lar | | | | | |
| ¥ | No | | | | | |
| _ | Yes. Fill in the details. | VA/Ib and to the m | | | Describe the contents | Value |
| | | Where is the p | property? | | Describe the contents | Value |
| | Owner's Name | Number Street | | | | |
| | | | | | | - |
| | Number Street | | | | | |
| | | | | | | |
| | | City | State | Zip Code | | |
| | City State Zip Code | _ | | | | |
| out 40. | Cive Details About Environment | al Information | | | | |
| art 10: | Give Details About Environment | ai iiiioiiiiatioii | | | | |
| or the | purpose of Part 10, the following definitions ap | ply: | | | | |
| = , | Environmental law means any federal, state, o | local statute or regula | ation concern | ing pollution, o | contamination, releases of | |
| | nazardous or toxic substances, wastes, or mat | | - | | | |
| i | including statutes or regulations controlling the | cleanup of these sub | ostances, was | tes, or materia | al. | |
| | Site means any location, facility, or property as | • | vironmental lav | v, whether you | now own, operate, or utilize it | |
| (| or used to own, operate, or utilize it, including | disposal sites. | | | | |
| - | Hazardous material means anything an enviror | mental law defines as | s a hazardous | wasta hazard | lous substance. | |
| 1 | toxic substance, hazardous material, pollutant, | | | wasic, nazara | | |
| | | contaminant, or simila | | wasic, nazara | | |
| eport: | | | ar term. | | | |
| eport : | all notices, releases, and proceedings that you | | ar term. | | | |
| | | know about, regardles | ar term. ss of when the | ey occurred. | | ? |
| | all notices, releases, and proceedings that you s any governmental unit notified you that | know about, regardles | ar term. ss of when the | ey occurred. | | ? |
| | all notices, releases, and proceedings that you s any governmental unit notified you that | know about, regardles | ar term. ss of when the | ey occurred. | | ? |
| | all notices, releases, and proceedings that you s any governmental unit notified you that | know about, regardles | ar term. ss of when the | ey occurred. | or in violation of an environmental law' | |
| | all notices, releases, and proceedings that you s any governmental unit notified you that | know about, regardles | ar term. ss of when the | ey occurred. | | Date of notice |
| | all notices, releases, and proceedings that you s any governmental unit notified you that No Yes. Fill in the details. | know about, regardles you may be liable or Governmental | ar term. ss of when the r potentially | ey occurred. | or in violation of an environmental law' | Date of |
| | all notices, releases, and proceedings that you s any governmental unit notified you that | know about, regardles | ar term. ss of when the r potentially | ey occurred. | or in violation of an environmental law' | Date of |
| | all notices, releases, and proceedings that you s any governmental unit notified you that No Yes. Fill in the details. | know about, regardles you may be liable or Governmental | ar term. ss of when the r potentially | ey occurred. | or in violation of an environmental law' | Date of |
| | all notices, releases, and proceedings that you s any governmental unit notified you that No Yes. Fill in the details. | know about, regardles you may be liable or Governmental | ar term. ss of when the r potentially | ey occurred. | or in violation of an environmental law' | Date of |
| | all notices, releases, and proceedings that you s any governmental unit notified you that No Yes. Fill in the details. | know about, regardles you may be liable or Governmental | ar term. ss of when the r potentially | ey occurred. | or in violation of an environmental law' | Date of |
| | all notices, releases, and proceedings that you s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street | Governmental Governmental Number Street | ar term. ss of when the r potentially I unit | ey occurred. | or in violation of an environmental law' | Date of |
| | all notices, releases, and proceedings that you s any governmental unit notified you that No Yes. Fill in the details. | Governmental Governmental Number Street | ar term. ss of when the r potentially I unit | ey occurred. | or in violation of an environmental law' | Date of |
| i. Ha | all notices, releases, and proceedings that you s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street | Governmental Governmental Number Street City | ar term. ss of when the r potentially I unit unit State | liable under o | or in violation of an environmental law' | Date of |
| i. Ha | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a | Governmental Governmental Number Street City | ar term. ss of when the r potentially I unit unit State | liable under o | or in violation of an environmental law' | Date of |
| i. Ha | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a | Governmental Governmental Number Street City | ar term. ss of when the r potentially I unit unit State | liable under o | or in violation of an environmental law' | Date of |
| i. Ha | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a | Governmental Governmental Wumber Street City ny release of hazard | ar term. ss of when the r potentially I unit unit State dous materia | liable under o | er in violation of an environmental law | Date of notice |
| i. Ha | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a | Governmental Governmental Number Street City | ar term. ss of when the r potentially I unit unit State dous materia | liable under o | or in violation of an environmental law' | Date of |
| i. Ha | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a | Governmental Governmental Wumber Street City ny release of hazard | ar term. ss of when the r potentially I unit unit State dous materia | liable under o | er in violation of an environmental law | Date of notice |
| i. Ha | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a | Governmental Governmental Wumber Street City ny release of hazard | ar term. ss of when the r potentially I unit State dous materia | liable under o | er in violation of an environmental law | Date of notice |
| i. Ha | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details. | Governmental under the control of th | ar term. ss of when the r potentially I unit State dous materia | liable under o | er in violation of an environmental law | Date of notice |
| i. Ha | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details. | Governmental under Street City Governmental Governmental under Street City Governmental | ar term. ss of when the r potentially I unit State dous materia | liable under o | er in violation of an environmental law | Date of notice |
| i. Ha | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details. | Governmental under Street Governmental under Street Governmental under Street Governmental under Street Governmental under Street Governmental under Street | ar term. ss of when the r potentially I unit State dous materia I unit | Zip Code | er in violation of an environmental law | Date of notice |
| i. Ha | s any governmental unit notified you that No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of a No Yes. Fill in the details. | Governmental under the control of th | ar term. ss of when the r potentially I unit State dous materia | liable under o | er in violation of an environmental law | Date of notice |

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| Deb | tor 1 | David | | | Foster | Case | number (if known) | |
|------|----------------------|------------------------|----------------|------------------------|----------------------------------|-----------------------|--|------------------|
| | | First Name | | Middle Name | Last Name | | | |
| | | | | | | | | |
| 26. | Hav | e you been a party | in any judici | al or administra | tive proceeding under | any environment | al law? Include settlements and order | S. |
| | V | No | | | | | | |
| | Ħ | Yes. Fill in the deta | ile | | | | | |
| | ш | res. Fill III the deta | 115. | | - | | | |
| | | | | C | Court or agency | | Nature of the case | Status of the |
| | | | | | | | | case |
| | | Case title | | | | | | Donding |
| | | | | _ | Court Name | | | Pending |
| | | | | _ ` | Jourt Name | | | On appeal |
| | | Case number | | | Number Street | | | |
| | | Ouse Harriser | | | | | | Concluded |
| | | | | - | City State | Zip Code | | |
| | | | | , | oily State | Zip Code | | |
| Part | 11- | Give Details A | bout Your | Business or | Connections to An | v Business | | |
| ı aı | | Olvo Dolano A | bout four | Buoinicoo or | ooimootiono to Am | y Buomooc | | |
| 27. | Wit | hin 4 vears hefore | vou filed for | hankruntev did v | vou own a husiness or | have any of the f | ollowing connections to any business | :7 |
| 21. | VVIL | illi 4 years belore | you med for | bariki upicy, did j | you own a business of | nave any or the n | ollowing connections to any business | •: |
| | | A sole propriet | or or self-emp | loved in a trade, p | rofession, or other activit | v. either full-time o | r part-time | |
| | | | | | or limited liability partners | | · part mile | |
| | | | | y company (LLC) | or inflited liability partifiers | silip (LLF) | | |
| | | A partner in a | | | | | | |
| | | An officer, dire | ctor, or manag | ging executive of a | corporation | | | |
| | | An owner of at | least 5% of th | e voting or equity | securities of a corporatio | n | | |
| | | | | | | | | |
| | $oldsymbol{\square}$ | No. None of the abo | | | | | | |
| | | Yes. Check all that a | apply above ar | nd fill in the details | below for each business | | | |
| | | | | | Describe the natu | re of the busines | Employer Identification n | umber Do not |
| | | | | | | | include Social Security no | |
| | | | | | | | | |
| | | Business Name | | | - | | EIN: | |
| | | 240000 . 140 | | | | | | |
| | | Number Street | | | - | | Dates business existed | |
| | | Number Street | | | Name of account | ant or bookkeepe | er | |
| | | | | | _ | · | | |
| | | City | State | Zip Code | | | FromTo | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | December the mate | | | |
| | | | | | Describe the natu | ire of the busines | Employer Identification n include Social Security no | |
| | | | | | | | include Social Security III | uniber of friin. |
| | | Desires N | | | _ | | EIN: | |
| | | Business Name | | | | | | |
| | | | | | _ | | Dates business existed | |
| | | Number Street | | | Name of account | ant or bookkoos | | |
| | | | | | Name of account | ангог рооккеере | | |
| | | City | State | Zip Code | _ | | From To | |
| | | - 7 | | , | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | re of the busines | Employer Identification n | number Do not |
| | | | | | | | include Social Security no | |
| | | | | | | | | |
| | | Business Name | | | _ | | EIN: | |
| | | | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | Mannoei Stieet | | | Name of account | ant or bookkeepe | | |
| | | | | | _ | | | |
| | | City | State | Zip Code | | | From To | <u></u> |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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| Debt | or 1 | David | | Foster | Case number (if known) |
|------|------------|---|-----------------------------|-------------------------------|---|
| | | First Name | Middle Name | Last Name | |
| 28. | cred | litors, or other parties. | iled for bankruptcy, did yo | u give a financial statemer | t to anyone about your business? Include all financial institutions, |
| | | No Yes. Fill in the details belo | ow. | | |
| | | | | Date issued | |
| | | Name | | MM/DD/YYYY | |
| | | Number Street | | _ | |
| | | City Sta | ate Zip Code | _ | |
| Part | 12: | Sign Below | | | |
| t | rue a | and correct. I understan ruptcy case can result ir | d that making a false state | ement, concealing propert | nts, and I declare under penalty of perjury that the answers are y, or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | /s/ David | Foster | | × |
| | | Signature of | Debtor 1 | | Signature of Debtor 2 |
| | | Date 9/14/2 | 2016 | | Date |
| | Did y | ou attach additional pa | ges to Your Statement of I | Financial Affairs for Individ | duals Filing for Bankruptcy (Official Form 107)? |
| [| ✓ N | No | | | |
| [| Y | ⁄es | | | |
| [| Did y | ou pay or agree to pay s | someone who is not an att | orney to help you fill out b | ankruptcy forms? |
| | ✓ ▷ | No | | | |
| [| \ | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.



- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.



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- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.



C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate



tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$310.00
- 3. Before signing this agreement, the attorney has received, \$0 toward the flat fee, leaving a balance due of \$4000.00; and \$61.76 for expenses, leaving a balance due for the filing fee of \$310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Do not sign this agreement if the amounts are blank.

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

| | | Northern District of | r Illinois | |
|------|--|-------------------------------------|--------------------------------|--------------------------------|
| n re | David Foster | | Case No. | |
| | Debtor | | | (If known) |
| | | | Chapter | Chapter 13 |
| | DISCLOSURE OF CO | OMPENSATION O | F ATTORNEY FO | OR DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fe that compensation paid to me within o services rendered or to be rendered o is as follows: | one year before the filing of th | e petition in bankruptcy, or a | agreed to be paid to me, for |
| | For legal services, I have agreed to a | ccept | | \$4,000.0 |
| | Prior to the filing of this statement I ha | ave received | | \$0.0 |
| | Balance Due | | | \$4,000.0 |
| 2. | The source of the compensation paid | to me was: | | |
| | Debtor | Other (specify) | | |
| 3. | The source of the compensation paid | to me is: | | |
| | ✓ Debtor | Other (specify) | | |
| 4. | I have not agreed to share the abomembers and associates of my la | ove-disclosed compensation aw firm. | with any other person unless | s they are |
| | I have agreed to share the above- members or associates of my law the people sharing in the compens | v firm. A copy of the agreeme | | |
| 5. | In return for the above-disclosed fee, a. Analysis of the debtor's financia bankruptcy; | - | | |
| | b. Preparation and filing of any pe | etition, schedules, statement | s of affairs and plan which m | ay be required; |
| | c. Representation of the debtor at | t the meeting of creditors and | confirmation hearing, and a | ny adjourned hearings thereof; |
| | d. Representation of the debtor in | n adversary proceedings and | other contested bankruptcy | matters; |
| 6. | By agreement with the debtor(s), the a | above-disclosed fee does not | include the following service | es: |
| | | | | |
| | | CERTIFICATIO | N | |
| | I certify that the foregoing is a complete ne debtor(s) in this bankruptcy proceedi | | nt or arrangement for payme | nt to me for representation |
| | 9/14/2016 | | /s/ Angie Harb | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Foster, David | Case No | | | | | |
|--------|--|---|-----------------------------|--|--|--|--|
| _ | Debtor(s) | | | | | | |
| | | Chapter. Chapte | r13 | | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | | |
| | The above named Debtors hereby verify that | the attached list of creditors is true and correct to t | he best of their knowledge. | | | | |
| | | | | | | | |
| Date: | 9/14/2016 | /s/ Foster, David | | | | | |
| | | Foster, David | | | | | |
| | | Signature of Debtor | | | | | |

WESTLAKE FIN 4751 WILSHIRE BVLD SUITE 100 LOS ANGELES , CA 90010 USA

JEFFERSON CAPITAL SYST PO BOX 7999 c/o Amy Payment Saint Cloud , MN 56302 USA

SOURCE RECEIVABLES MNG 4615 DUNDAS DR STE 102 GREENSBORO , NC 27407 USA

Peoples Gas 200 E. Randolph Chicago , IL 60601 USA

DEBT RECOVERY SOLUTION 900 Merchants Concourse # LL-11 Westbury , NY 11590 USA

COMNWLTH FIN 960 N MAIN STREET SCRANTON , PA 18508 USA

SW CRDT SYS 2629 DICKERSON PK CARROLLTON , TX 75007 USA

ComEd 3 Lincoln Center Bankruptcy Section Oakbrook Terrace , IL 60181 USA

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , FL 32256 USA

TMobile P.O. Box 742596 Cincinnati , OH 45274 USA

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE , FL 32256 USA

City of Chicago Parking 121 N. LaSalle St # 107A Case 16-29362 Doc 1 Filed 09/14/16 Entered 09/14/16 18:17:11 Desc Main Document Page 63 of 69

Chicago , IL 60602 USA PLS 8026 S Cicero Ave Burbank , IL 60459 USA

First Car Gallery Inc 1330 S Cicero Ave Cicero , IL 60804 USA

CHASE PO Box 15298 Wilmington , DE 19850 USA

TCF Bank 919 Estes Court Schaumburg , IL 60193 USA

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| Debtor 1 David | | Foster | Case number (if known) | |
|---|---|--|--|--|
| First Name Part 6: Answer These Q | Middle Name uestions for Reporting Purp | Last Name | | |
| 16. What kind of debts do you have? | 16a. Are your debts primar | rily consumer debts? an individual primarily for rily business debts? E iness or investment or t | or a personal, family Business debts are o through the operatio | y, or household purpose." debts that you incurred to on of the business or |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Paid that funds will be ava | | ny exempt property is exc and creditors? | luded and administrative expenses are |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,00 | 7.4 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$ \$10,000,001-5 \$50,000,001-5 \$100,000,001 | \$50 million \$100 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$ \$10,000,001-\$ \$50,000,001-\$ \$100,000,001 | \$50 million [\$100 million [| \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Pan 7. Sign Below | | | | |
| For you | and correct. If I have chosen to file under 11,12, or 13 of title 11, United choose to proceed under Cha If no attorney represents me me fill out this document, I ha I request relief in accordance I understand making a false s connection with a bankruptcy years, or both. 18 U.S.C. §§ 1 | Chapter 7, I am aware I States Code. I understopter 7. and I did not pay or agrowe obtained and read the with the chapter of title tatement, concealing processe can result in finesting the statement. | that I may proceed, tand the relief availaree to pay someone he notice required but 11, United States Coroperty, or obtaining up to \$250,000, or 571. | who is not an attorney to help y 11 U.S.C. § 342(b). Code, specified in this petition. I money or property by fraud in imprisonment for up to 20 |
| | Executed on9/14/2016 MM / DD | O/YYYY | Executed on _ | MM / DD / YYYY |

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| FI | ll in this inform | nation to identify your cas | er . | | | |
|------------|--|-----------------------------|-----------------------------|--------------------------------|--|---------------------------------------|
| De | ebtor 1 | David | | Foster | | |
| | | First Name | Middle Name | Last Name | er-Annaber | |
| | ebtor 2 pouse, if filing | First Namo | Middle Name | 1 1 31 | | |
| | | | | Last Name | | |
| U | nited States Ba | ankruptcy Court for the: | Northern | District of Illinois (State) | water- | |
| ŧ | ase number | ***** | | (State) | anti Africano. | |
| (1) | known) | | | | | - Company |
| O | fficial F | Form 106De | C | | | Check if this is an amended filing |
| D | eclarat | ion About a | — n Individual D | ebtor's Sched | ulac | 4044 |
| Market Co. | C-0240 D000 H000 H000 H000 H000 H000 H000 H0 | | | | | 12/1: |
| | | | | sible for supplying correct | | |
| You | ı must file thi | is form whenever you t | ile bankruptcy schedules | or amended schedules. Ma | king a false statement, concealing prope | rty, or obtaining |
| §§ 1 | 152, 1341, 151 | 9, and 3571. | ion with a ballkruptcy cas | e can result in lines up to \$ | 250,000, or imprisonment for up to 20 year | ars, or both. 18 U.S.C. |
| | | | | | | |
| | nik Sign | Relow | | | | |
| | Did you pa | y or agree to pay some | one who is NOT an attorn | ey to help you fill out bankr | uptcy forms? | |
| | ☑ No | | | | | |
| | Yes N | ame of person | | Attoch Rankaintou D | etition Preparer's Notice, Declaration, and | |
| | Bennet | amanuaring | | Signature (Official Fo | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Under pen | alty of periury. I declare | e that I have read the sumr | nary and schedules filed wi | ith this declaration and | |
| | that they a | re true and correct. | 0-1 | y | n ma acomanon and | |
| × | /s/ David F | oster (| Y LA | × | | |
| | Signature of | Debtor 1 | | Signature (| of Debtor 2 | |
| | Date 9/14/2 | 016 | | Date | | |
| | | nnwyyy | | | The Control of the Co | |

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| ebtor 1 | David First Name | Maddle Alice | Foster | Case number (if known) |
|--|--|---|-------------------------------|---|
| | rust Name | Middle Name | Last Name | |
| 3. Wit | hin 2 years before yo ditors, or other partie | u filed for bankruptcy, did s. | you give a financial statem | ent to anyone about your business? Include all financial institutions |
| \ | No Yes. Fill in the details b | pelow. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | _ |
| | Number Street | | Park Commission of | |
| | City | State Zip Code | · · | |
| | ************************************** | | | |
| l have | e read the answers on | this Statement of Finance | ial Affairs and any attachm | ents, and I declare under penalty of perjury that the answers are |
| aue | ma correct, i underst | and that making a faise st | atement, concealing prope | rty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | & | (C, C, 7 A | * |
| | Signature | rid Foster | -141 | |
| | | 0.0000 | | Signature of Debtor 2 |
| | Date 9/14 | 1/2016 | | Date |
| Did y | ou attach additional p | pages to Your Statement o | f Financial Affairs for Indiv | iduals Filing for Bankruptcy (Official Form 107)? |
| Soomered. | lo | | | |
| [] Y | es | | | |
| Did y | ou pay or agree to pay | y someone who is not an a | attorney to help you fill out | pankruptcy forms? |
| SOMEON TO SERVICE STATE OF THE | le . | | | |
| VN | Ю | | | |

i), F

Declaration, and Signature (Official Form 119).

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UNITED STATES BANKRUPTCY COURT Northern District of Illinois

| In re: | Foster, David | Ones No | |
|--------|--------------------------------------|---|------|
| - | Debtor(s) | Case No | ~ |
| | | Chapter. Chapter13 | |
| | VERIF | CATION OF CREDITOR MATRIX | |
| | The above named Debtors hereby verif | y that the attached list of creditors is true and correct to the best of their knowle | ∍dg∈ |
| | | \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc \bigcirc | |
| Date: | 9/14/2016 | Is/ Foster, David | |

Signature of Debtor

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| Debt | or 1 | David First Name | BACADA > I | Foster | Case number (if known) | | |
|---|---|--|------------------------------|--|---|-----------------------|--|
| 16 | C=1 | | Middle Name | Last Name | | | |
| 10. | _ | culate the median family in | | | : | | |
| | | . Fill in the state in which you | | Illinois | | | |
| | | . Fill in the number of people | • | 1 | *** | | |
| | 16c. | 6c. Fill in the median family income for your state and size of household To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | | | | \$49,741.00 s list | |
| 17. | Hov | flow do the lines compare? | | | | | |
| | 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | | ınder | |
| | 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. | | | | | ;§ copy | |
| Parit | gg (| Calculate Your Commi | tment Period Und | der 11 U.S.C. §132 | 5(b)(4) | | |
| 18. | | y your total average month | | | | \$2,523.20 | |
| Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy | | | | | s not filling with you, and you contend that calculating the r spouse's income, copy the amount from line 13. | | |
| | 19a. | If the marital adjustment does | s not apply, fill in 0 on li | ne 19a. | | -\$0.00 | |
| | | Subtract line 19a from line | | | | \$2,523.20 | |
| 20, | Calc | culate your current monthly | income for the year. | Follow these steps: | | lemunnu mremuuseud | |
| | 20a. | 0a. Copy line 19b. | | | | | |
| | | Multiply by 12 (the number of | f months in a year). | | | x 12 | |
| | 20b. | The result is your current mo | onthly income for the ye | ar for this part of the forn | n. | \$30,278.40 | |
| | 20c. | c. Copy the median family income for your state and size of household from line 16c. | | | | | |
| 21. | | ow do the lines compare? | | | | | |
| Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The operiod is 3 years. Go to Part 4. | | | | | op of page 1 of this form, check box 3, The commitment | | |
| Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check commitment period is 5 years. Go to Part 4. | | | | | ourt, on the top of page 1 of this form, check box 4, The | | |
| ant 4 | E S | Sign Below | | Valentinista on a service of the ser | | | |
| By signing here, I declare under-penalty of perjury that the information on this statement and in any attachments is true and correct. | | | | | | | |
| and come and come and come and any attack them is is true and come | | | | | statement and in any attachments is true and correct. | | |
| | | ★ /s/ David Foster / Signature of Debtor 1 | 61/h | X | Signature of Debtor 2 | | |
| | | Data 6MAI3946 | | | | | |
| | | Date <u>9/14/2016</u> MM/DD/YYYY | | | Date MM/DD/YYYY | | |
| | If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above. | | | | | | |